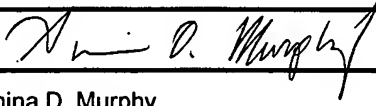


<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/069,809	
	Filing Date	November 13, 2002	
	First Named Inventor	Sohn, Lydia L.	
	Art Unit	1634	
	Examiner Name	Robert T. Crow	
Total Number of Pages in This Submission	6	Attorney Docket Number	022363-000100US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply - Response to Restriction Requirement (1 pg) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request - 1 pg in duplicate (2 pgs total) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard (1 pg) Copy of Utility Patent App. Transmittal Sheet for Continuation cited in response (1 pg)
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature *			
Printed name	Anina D. Murphy		
Date	October 24, 2006	Reg. No.	51,049

CERTIFICATE OF TRANSMISSION/MAILING
EXPRESS MAIL LABEL NO.: EV 823 416 839 US

COPY

PTO/SB/05 (07-06)

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	022363-000110US
	First Inventor	Sohn, Lydia Lee
	Title	MICROFLUIDIC AND NANOFUIDIC ELECTRONIC DEVICES FOR DETECTING CHANGES IN CAPACITANCE OF FLUIDS AND METHODS OF USING
	Express Mail Label No.	EV 824 645 427 US

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>	<b>ADDRESS TO:</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input type="checkbox"/> <b>Fee Transmittal Form</b> (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> <b>Applicant claims small entity status.</b> See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> <b>Specification, Claims and Abstract</b> [Total Pages <u>43</u> ] Both the claims and abstract must start on a new page <i>(For information on the preferred arrangement, see MPEP 608.01(a))</i> 4. <b>Drawing(s)</b> (35 U.S.C. 113) [Total Sheets <u>15</u> ] 5. <b>Oath or Declaration</b> [Total Sheets <u>3</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> A copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> <b>Application Data Sheet.</b> See 37 CFR 1.76 (5 pp.). 7. <input type="checkbox"/> <b>CD-ROM or CD-R</b> in duplicate, large table or Computer Program <i>(Appendix)</i> <input type="checkbox"/> Landscape Table on CD 8. <b>Nucleotide and/or Amino Acid Sequence Submission</b> <i>(if applicable, items a. - c. are required)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <b>Specification Sequence Listing on:</b> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies	<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> <b>Assignment Papers</b> (cover sheet & document(s)) Name of Assignee _____ 10. <input type="checkbox"/> <b>37 CFR 3.73(b) Statement</b> <input type="checkbox"/> <b>Power of Attorney</b> <i>(when there is an assignee)</i> 11. <input type="checkbox"/> <b>English Translation Document</b> <i>(if applicable)</i> 12. <input type="checkbox"/> <b>Information Disclosure Statement</b> (PTO/SB/08 or PTO-1449) <input type="checkbox"/> Copies of foreign patent documents, publications, & other information 13. <input checked="" type="checkbox"/> <b>Preliminary Amendment</b> (6 pp.). 14. <input checked="" type="checkbox"/> <b>Return Receipt Postcard</b> (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> <b>Certified Copy of Priority Document(s)</b> <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> <b>Nonpublication Request</b> under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> <b>Other:</b> Copy of Transmittal, Response and Petition to Extend Time filed for US 10/069,809 (3 pp.)

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

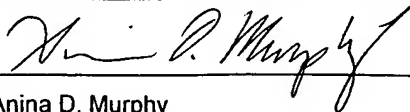
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: 10/069,809

Prior application information: Examiner Robert Thomas Crow Art Unit: 1634

#### 19. CORRESPONDENCE ADDRESS

☒ The address associated with Customer Number: **20350** OR ☐ Correspondence address below

Name					
Address					
City	State	Zip Code			
Country	Telephone	Email			

Signature		Date	October 24, 2006
Name (Print/Type)	Anina D. Murphy	Registration No. (Attorney/Agent)	51,049